

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	yr	19 905	1/26/01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	2/12/01
2	2/13/01
3	2/13/01
4	2/13/01
5	2/13/01
6	2/13/01
7	2/13/01
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9	2/13/01
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49	2/13/01
50	2/13/01

Claim	Date
Final Original	
25	2/13/01
26	2/13/01
27	2/13/01
28	2/13/01
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49	2/13/01
50	2/13/01

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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